| Case 16-01644 Doc 1 Fill in this information to identify your case: | Filed 01/20/16 | Entered 01/20/16 10:49:57 age 1 of 70 | Desc Main |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | |
|---|---|
| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name Gwendolyn | |
| First name Write the name that is on | First name |
| your government-issued picture identification (for Middle name | Middle name |
| example, your driver's Daniels | |
| license or passport Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) |
| 2. All other names you | |
| have used in the last First name | First name |
| 8 years | |
| Middle name Include your married or | Middle name |
| maiden names. Last name | Last name |
| First name | First name |
| Middle name | Middle name |
| Last name | Last name |
| 3. Only the last 4 digits XXX - XX- 7151 of your Social | |
| Security number or OR | OR |
| federal Individual 9 xx - xx- Taxpayer Identification number (ITIN) | 9 xx - xx- |

Gwend Gwase 16-01644 Doc 1 Filed 01/20/16 Entered @1420/16/16049:57 Desc Main Debtor 1 Page 2 of 70 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names ✓ I have not used any business names or EINs. ✓ I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names 5. Where you live If Debtor 2 lives at a different address: 626 E. Woodland Park, Apt 508 Number Street Number Street Chicago Illinois 60616 State City Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this district to file for Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (140:49:57 Desc Main

Document Document Page 3 of 70 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When 9/24/2013 Case number MM / DD / YYYY District When Case number District _____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with MM / DD / YYYY you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

No. Go to line 12.

this bankruptcy petition.

Gwend Gwase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16/140:49:57 Desc Main Debtor 1 Page 4 of 70 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? ◪ No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

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t Name Middle Name

Document Document

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of completion. completion. Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment plan, if any. plan, if any. I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required you to file this case. you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit

counseling with the court.

military combat zone.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

Gwend Grase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (140:49:57 Desc Main Debtor 1 Page 6 of 70 Document Document **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Gwendolyn Daniels Signature of Debtor 2 Signature of Debtor 1 Executed on 1/20/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (140:49:57 Desc Main Pirst Name Documents) Page 7 of 70

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Michael Spangler 6310219 | | | Date | 1/20/2016 |
|----------------------------------|--------|-------|------|----------------|
| Signature of Attorney for Debtor | | | | MM / DD / YYYY |
| Michael Spangler 6310219 | | | | |
| Printed name | | | | |
| Semrad Law Firm | | | | |
| Firm name | | | | |
| Number | Street | | | |
| City | | State | | Zip Code |
| Contact phone | | | | Email address |
| Bar number | | | | State |

Doc 1 Filed 01/20/16 Entered 01/20/16 10:49:57 Fill in this information to identify your case: Debtor 1 Gwendolyn **Daniels** First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$8,885.00 1b. Copy line 62, Total personal property, from Schedule A/B \$8,885.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$15,807.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$10.903.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$26,710.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$1,956.39

5. Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$1,505.64

Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (140:49:57 Desc Main

| First Name | Document | Page 9 of 70 | Page 10 from the page 10 from

| Par | 4: Answer These Questions for Administrative and Statistical Records | 10 | |
|-----|--|------------------------------------|------------|
| | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the Yes. | e court with your other schedules. | |
| | What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those incurred by an individ family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the this form to the court with your other schedules. | U.S.C. § 159. | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income. Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | e from Official | \$1,956.39 |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | Total claim | |
| | From Part 4 on Schedule E/F, copy the following: | | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$0.00 | |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | |
| | 9d. Student loans. (Copy line 6f.) | \$0.00 | |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$0.00 | |
| | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$0.00 | |

\$0.00

9g. Total. Add lines 9a through 9f.

| Fill in this | information to identify your case | | FIIEU VIIIZVIID | Ellieren 01720/16 | 10.49.57 DESC | o Mairi |
|---|---|---|--|---|--|---------------------------------------|
| Debtor 1 | Gwendolyn | | Danie | els | | |
| | First Name | Middle N | Name Last I | Name | | |
| Debtor 2 (Spouse, | if filing) First Name | Middle N | Name Last I | Name | | |
| United St | ates Bankruptcy Court for the: | Northern | District of I | Illinois (State) | | |
| Case nun (If known) | | | | | | |
| Officia | al Form 106A/B | | | | | Check if this is an amended filing |
| Sche | dule A/B: Prope | erty | | | | 12/1 |
| category v esponsib vrite your Part 1: | ategory, separately list and des where you think it fits best. Be ble for supplying correct infor rname and case number (if kn Describe Each Residen u own or have any legal or eq | e as complete and mation. If more sp nown). Answer eve ce, Building, L | accurate as possible. pace is needed, attach ery question. .and, or Other Rea | If two married people are filing a separate sheet to this formal Estate You Own or Ha | ng together, both are equ n. On the top of any addi | ually |
| ✓ | No. Go to Part 2 | | | | | |
| 1.1 | Yes. Where is the property? Street address, if available, or | other description | What is the property Single-family home | | Do not deduct secured of the amount of any secure Creditors Who Have Cla | • |
| | | | Condominium or c | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street City State | Zip Code | Land Investment propert Timeshare Other | у | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the | debtors and another ou wish to add about this iter | Check if this is con (see instructions) m, such as local | mmunity property |
| If you | own or have more than one, list h | nere: | What is the property | /? Check all that apply. | Do not deduct secured c | laima or avamationa Dut |
| 1.2 | Street address, if available, or | other description | Single-family home | e | the amount of any secure | • |
| | | | Condominium or c Manufactured or m | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street City State | Zip Code | Land Investment propert Timeshare Other | у | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | | | Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the | debtors and another | Check if this is con (see instructions) | mmunity property |

| Debtor 1 | Gwend Gwase 16-0164 | 14 Doc 1 Middle Name | Filed 01/20/16 Entered 01/20/16 | #49: <u>57 De</u> | esc Main |
|------------------------|---|--|---|---|--|
| 1.3 Stre | et address, if available, or oth | | Documerina Page 11 of 70 What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any sec | d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? |
| Nun | | Zip Code | Land Investment property Timeshare Other | Describe the nature interest (such as fee the entireties, or a li | simple, tenancy by |
| | | [[[] | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, soroperty identification number: | (see instruction | community property s) |
| you ha | | on you own for all | l of your entries from Part 1, including any entries fo | | |
| Do you ov ou own th | vn, lease, or have legal or ed at someone else drives. If you ns, trucks, tractors, sport utility | quitable interest in lease a vehicle, also | any vehicles, whether they are registered or not? In preport it on Schedule G: Executory Contracts and Unexpoles | | |
| | Make Model: Year: Approximate mileage: Other information: 2010 Dodge Grand Caravan | Dodge Grand Caravan 2010 100000 | Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | the amount of any sec | d claims or exemptions. Put sured claims on <i>Schedule D:</i> Claims Secured by Property. e Current value of the portion you own? \$6775.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | the amount of any sec | d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. e Current value of the portion you own? |

| | Gwend (C) ase 16-01644 Doc 1 | Filed 01/20/16 Entered 01/20/14 | 6 ⁄4 0;49: <u>57 Desc Main</u> | | |
|-----|--|---|---|--|--|
| | First Name Middle Name | Document Page 12 of 70 | | | |
| 3.3 | Make | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put | | |
| | Model: Year: | one. | the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Propert | | |
| | Approximate mileage: | Debtor 1 only | Creditors who have Claims Secured by Fropert | | |
| | Approximate mileage. | Debtor 2 only | Current value of the Current value of the | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? portion you own? | | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 3.4 | Make | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put | | |
| | Model: | one. | the amount of any secured claims on Schedule D. | | |
| | Year: | Debtor 1 only | Creditors Who Have Claims Secured by Property | | |
| | Approximate mileage: | Debtor 2 only | Current value of the Current value of the | | |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? portion you own? | | |
| | | At least one of the debtors and another | | | |
| | | Check if this is community property (see | | | |
| | | instructions) | | | |
| 4.1 | Make | Who has an interest in the property? Check | Do not deduct secured claims or exemptions. Put | | |
| | | | | | |
| | Model: | one. | the amount of any secured claims on Schedule D. | | |
| | Year: | one. Debtor 1 only | the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Propert | | |
| | | one. | Creditors Who Have Claims Secured by Propert Current value of the Current value of the | | |
| | Year: | one. Debtor 1 only | Creditors Who Have Claims Secured by Propert | | |
| | Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only | Creditors Who Have Claims Secured by Propert Current value of the Current value of the | | |
| | Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Creditors Who Have Claims Secured by Propert Current value of the Current value of the | | |
| | Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Creditors Who Have Claims Secured by Propert Current value of the Current value of the | | |
| 4.2 | Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Creditors Who Have Claims Secured by Propert Current value of the entire property? Do not deduct secured claims or exemptions. Put | | |
| 4.2 | Year: Approximate mileage: Other information: Make Model: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Creditors Who Have Claims Secured by Propert Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. | | |
| 4.2 | Year: Approximate mileage: Other information: Make Model: Year: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | Creditors Who Have Claims Secured by Propert Current value of the entire property? Do not deduct secured claims or exemptions. Put | | |
| 4.2 | Year: Approximate mileage: Other information: Make Model: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Creditors Who Have Claims Secured by Propert Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. | | |
| 4.2 | Year: Approximate mileage: Other information: Make Model: Year: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property | | |
| 4.2 | Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Properticular Current value of the Current value of the | | |
| 4.2 | Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Properticular Current value of the Current value of the | | |

Doc 1 Debtor 1 Gwend Gwase 16-01644
First Name

| Do you own or h | ave any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|---|---|--|
| 6. Household good | | |
| — | oliances, furniture, linens, china, kitchenware | |
| No | | |
| Yes. Describe | Used Furniture | \$500.00 |
| 7. Electronics | | |
| • | ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ns; electronic devices including cell phones, cameras, media players, games | |
| No Solicotion | is, stocker to de note interesting con prientes, camerate, media payore, games | |
| Yes. Describe | | |
| res. Describe | | |
| 8. Collectibles of va | | |
| | and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles | |
| ✓ No | | |
| Yes. Describe | | |
| | | |
| 9. Equipment for sp | | |
| | hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments | |
| No | ·,·.,·.,·., | |
| Yes. Describe | | |
| ICS. Describe | | |
| | | |
| 10. Firearms | | |
| Examples: Pistols, ri | fles, shotguns, ammunition, and related equipment | |
| Examples: Pistols, ri | fles, shotguns, ammunition, and related equipment | |
| Examples: Pistols, ri | fles, shotguns, ammunition, and related equipment | |
| Examples: Pistols, ri | fles, shotguns, ammunition, and related equipment | |
| Examples: Pistols, ri No Yes. Describe 11. Clothes | fles, shotguns, ammunition, and related equipment clothes, furs, leather coats, designer wear, shoes, accessories | |
| Examples: Pistols, ri No Yes. Describe 11. Clothes | | |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday | | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe | clothes, furs, leather coats, designer wear, shoes, accessories | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry | clothes, furs, leather coats, designer wear, shoes, accessories Used Clothing | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er Is ts, birds, horses | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca No Yes. Describe 14. Any other perso | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er Is ts, birds, horses | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er Is ts, birds, horses | \$500.00 |
| Examples: Pistols, ri No Yes. Describe 11. Clothes Examples: Everyday No Yes. Describe 12. Jewelry Examples: Everyday gold, silv No Yes. Describe 13. Non-farm anima Examples: Dogs, ca No Yes. Describe 14. Any other perso No Yes. Describe | Used Clothing jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er Is ts, birds, horses | \$500.00 |

Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 / Aug. 49:57 Desc Main
First Name Document Page 14 of 70

Describe Your Financial Assets

| Do | you own or have a | ny legal or equitable inte | rest in any of the following | ? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|-----|--|--|--|-----------------------------|---|
| - | ☑ No | e in your wallet, in your home, in a s | afe deposit box, and on hand when you | I file your petition | |
| 17. | , , | • | certificates of deposit; shares in credit unts with the same institution, list each | | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Bank of America | | \$0.00 |
| | | 17.2. Checking account: | Bank of America Savings Account | | \$0.00 |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | Examples: Bond funds, in | or publicly traded stocks vestment accounts with brokerage | firms, money market accounts | | |
| | ✓ No ☐ Yes | Institution or issuer name: | | | |
| | | | | | |
| 19. | Non-publicly traded st an LLC, partnership, a | | ed and unincorporated businesses | s, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | | | | |

| Deb | tor 1 Gwend Walse It | | IIEU OTDAMIS | Entered (Case2United (Akb) 49: | 57 Desc Main |
|-----|---------------------------|---|--------------------------------|--|--------------|
| | | | | age 15 of 70 | |
| 20. | | orate bonds and other negotia | | | |
| | | nclude personal checks, cashiers nts are those you cannot transfer | | | |
| | ✓ No | , | , , , | ğ | |
| | Yes. Give specific | | | | |
| | information about | Issuer name: | | | |
| | them | | | | |
| | | _ | | | |
| | | | | | |
| 21 | Retirement or pension | accounts | | | |
| 21. | | |), thrift savings accounts | , or other pension or profit-sharing plans | S |
| | No | | | | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | Cook County Pension | n Account | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Security deposits and p | prepayments | | | |
| | | deposits you have made so that yo | | | |
| | companies, or others | with landlords, prepaid rent, publi | ic utilities (electric, gas, v | vater), telecommunications | |
| | No | | | | |
| | ✓ Yes | | Institution name: | | |
| | | Electric: | Security Deposit: Wo | oodland Park Apartments | \$1100.00 |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | _ |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | r a periodic payment of money to | you, either for life or for a | number of years) | |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Debt | or 1 | Gwend First Name | ase 1 | <u> 16-01644</u> | Doc 1 | | 01/20/16 | Entered 01/2 Page 16 of 70 | 0/16/160:49: <u>57</u> | Desc Main |
|------|----------|------------------------------|---------------------|---|------------------------------------|--------------|------------------------------------|-------------------------------|----------------------------------|---|
| 24. | | | | ation IRA, in a I), 529A(b), an | | a qualified | d ABLE progra | m, or under a qualifie | d state tuition program. | |
| | | No Yes | Institut | ion name and | description. Sep | arately file | the records of a | ny interests.11 U.S.C. § | 521(c): | |
| 25. | | ısts, equita | | | sts in property | (other tha | an anything lis | ted in line 1), and righ | ts or powers | |
| | | No Yes. Desc | cribe | | | | | | | |
| 26. | Exa | | rnet do | | | | intellectual proyalties and licens | operty sing agreements | | |
| 27. | | | lding pe | | eneral intangil e licenses, coo | | ssociation holdin | gs, liquor licenses, prof | essional licenses | |
| Mor | ney | or prope | erty o | wed to you | ? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Тах | refunds o | wed to | you | | | | | | |
| | | Yes. Give s abou you a | t them, Iready t | information including wheth filed the returns ears | | | | | Federal: State: Local: | |
| 29. | | nily suppoi mples: Past | | lump sum alim | ony, spousal su | oport, child | support, mainte | nance, divorce settleme | nt, property settlement | |
| | | | specific | information | | | | | Alimony: Maintenance: Support: | |
| | | | | | | | | | Divorce settlement | |
| | | mples: Unp | aid wag | | | | | pay, vacation pay, worke | ers' compensation, | |
| | ✓ | No Yes. Desci | ibe | | | | | | | |

| Debt | tor 1 | Gwend Gwase 16 First Name | 6-01644 | Doc 1 Middle Name | Filed 01/20/16 Document | <u>Entered</u> 01/20/0 Page 17 of 70 | l.6 @1.00;49: <u>57</u> D | esc Main |
|------|----------|--|-------------------|----------------------|---|---|----------------------------------|--|
| 31. | | rests in insurance mples: Health, disabi | | rance; health | | credit, homeowner's, or rente | r's insurance | |
| | ✓ | No Yes. Name the insur- of each policy and lis | | | Company name: Term Life Through Cook (| County | Beneficiary: | Surrender or refund value: \$0.00 |
| 32. | If yo | u are the beneficiary erty because someon No | of a living trust | | omeone who has died ceeds from a life insurance | e policy, or are currently entitle | d to receive | |
| | Ш | Yes. Describe | | | | | | |
| 33. | Exal | | | | u have filed a lawsuit or nce claims, or rights to sue | made a demand for paymer | nt | - |
| 34. | to s | er contingent and et off claims No Yes. Describe | unliquidated | claims of e | very nature, including c | ounterclaims of the debtor | and rights | |
| 35. | Any | financial assets yo | u did not alrea | ady list | | | | |
| | | No Yes. Describe | | | | | | |
| 36. | | | | | | tries for pages you have att | | \$1100.00 |
| Part | 5: | Describe Any B | usiness-Re | elated Pro | operty You Own or I | Have an Interest In. Li: | st any real estate i | n Part 1. |
| 37. | Doy | ou own or have an | y legal or equ | uitable inter | est in any business-rela | ted property? | | |
| | ✓ | No. Go to Part 6. Yes. Go to line 38. | | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | _ | ounts receivable or No | commissions | s you alread | dy earned | | | |
| | | Yes. Describe | | | | | | |
| 39. | | ce equipment, furn mples: Business-rela | | | nodems, printers, copiers, | fax machines, rugs, telephone | es, desks, chairs, electron | ic devices |
| | | No Yes. Describe | | | | | | · |

| | | Gwend wase 16 First Name | | Doc 1 | Filed 01/20/16 Document | Page 18 of 70 | 66.049: <u>57 D</u> | esc Main | |
|--------------|--------------|---|-------------------|-------------------------------|------------------------------|-----------------------------|---------------------|----------------------------|-------------|
| 40. | Mac | chinery, fixtures, eq | uipment, sup | plies you us | se in business, and tools | of your trade | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 41. | Inve | entory | | | | | | | |
| | \checkmark | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 42. | Inte | rests in partnershi | ps or joint ve | entures | | | | 1 | |
| | ✓ | No | | | | | | | |
| | | Yes. Give specific | | | Name of entity: | | % of ownership: | | |
| | | information about | | | | | | | |
| | | them | | | | | | | |
| | | | | | | | | | |
| 43. C | Custo | omer lists, mailing | lists, or other | r compilatio | ns | | | | |
| | ✓ | _ | | • | | | | | |
| | = | | clude personal | lly identifiable | e information (as defined in | 1 U.S.C. § 101(41A))? | | | |
| | | _ | • | • | , | 5 | | | |
| | | ∐ No | | | | | | | |
| | | Yes. Descri | ibe | | | | | - | |
| 44. | Any | business-related p | roperty you o | did not alrea | dy list | | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Give specific | | | | | | | |
| | | information | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 15. A | dd th | ne dollar value of al | l of your entr | ies from Par | rt 5. including any entries | for pages you have attach | ned | | |
| | | | • | | | | | | |
| Part | 6: | Describe Any F | arm- and (| Commerci mland, list it in | al Fishing-Related P | roperty You Own or H | lave an Interest In | | |
| 46. | Do | you own or have a | ny legal or eq | uitable inter | rest in any farm- or comm | ercial fishing-related prop | erty? | | |
| | | No. Go to Part 7. | | | | | | Current va | |
| | Ħ | Yes. Go to line 47. | | | | | | portion you Do not dedu | |
| | | | | | | | | claims | or occurred |
| 47 | _ | | | | | | | or exemption | IS |
| 47. | | m animals <i>mpl</i> es: Livestock, pou | ultry, farm-raise | ed fish | | | | | |
| | | | ,, | | | | | | |
| | 넴 | No Yes. Describe | | | | | | 1 | |
| | Ш | 169. DESCINE | | | | | | | |

| Deb | tor 1 | Gwend Gwase 16 First Name | 6-01644 | Doc 1 Middle Name | Filed 01/20/16 Document | <u>Entered</u> @1a Page 19 of 7 | /20/16/140:49: <u>57</u> '0 | Desc | Main |
|--------------|----------|---|------------------|----------------------|---------------------------------|------------------------------------|--------------------------------|--------|-------------|
| 48. | Cro | ps-either growing | or harvested | | | . age _e e | • | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 49. | Farr | m and fishing equi | oment, imple | ments, machi | inery, fixtures, and too | ls of trade | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 50. | Farı | m and fishing supp | lies, chemica | als, and feed | | | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 51. | | farm- and commen mples: Livestock, pou | | | ty you did not already | list | | | |
| | ✓ | No | | | | | | | |
| | | Yes. Describe | | | | | | | |
| 52. A | dd th | e dollar value of all | l of your entr | ies from Part | 6, including any entrie | es for pages you have | e attached | | |
| for Pa | art 6. | Write that number | here | | | | ▶ | | |
| | | | | | | | | | |
| Part | 7: | Describe All Pro | operty You | Own or Ha | ive an Interest in ⁻ | That You Did Not | List Above | | |
| | Do y | ou have other properties: Season tickets | perty of any l | kind you did n | | | | | |
| | | No | s, courting club | тистыстыпр | | | | | |
| | | Yes. Give specific | | | | | | | |
| | | information | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 54. A | dd th | e dollar value of all | of your entr | ies from Part | 7. Write that number h | ere | | .▶ | |
| | | | | | | | | | |
| Part | 0. | List the Totals | of Each Da | rt of this E | orm | | | | |
| | | | | | | | | | |
| 55. F | art 1 | : Total real estate, I | ine 2 | | | | ▶ | | |
| 56. p | art 2 | total vehicles, line | 5 | | \$6775. | 00 | | | |
| 57. P | art 3: | : Total personal and | d household | items, line 15 | \$1000. | 00 | | | |
| 58. P | art 4: | : Total financial ass | ets, line 36 | | \$1100.0 | 00 | | | |
| 59. F | Part 5 | i: Total business-re | lated proper | ty, line 45 | | | | | |
| 60. F | Part 6 | : Total farm- and fi | shing-related | d property, lin | e 52 | | | | |
| 61. F | Part 7 | : Total other prope | rty not listed | l, line 54 | | | | | |
| 62. 1 | otal | personal property. | Add lines 56 t | hrough 61 | \$8875. | 00 | | | + \$8875.00 |
| | | | | | | | Copy personal property to | otal > | |
| | | | | | | | | | \$8875.00 |
| 63. T | otal c | of all property on S | chedule A/B. | Add line 55 + | line 62 | | | | |

| | Case 16-01644 | Doc 1 Filed 01 | /20/16 Entered 01/20/16 | 10:49:57 | Desc Main |
|--|---|--|--|--|--|
| Fill in this in | nformation to identify your case: | | U | | |
| Debtor 1 | Gwendolyn | | Daniels | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if | filing) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case numb (If known) | | | (State) | | |
| Officia | al Form 106C | | | | Check if this is amended filing |
| Sched | lule C: The Prop | erty You Clain | n as Exempt | | 12/ |
| for each s to state xempted eceive c xemption roperty Part 1: Ic Whicl | any additional pages, writted as a specific dollar amount of an ertain benefits, and taxin of 100% of fair market is determined to exceed dentify the Property You have claiming state and federal fou are claiming federal exemptions. | im as exempt, you mut as exempt. Alternative applicable statutory exempt retirement full value under a law that amount, your exempt retirement full for the following and the following retirement for the following | ust specify the amount of the exively, you may claim the full fair y limit. Some exemptions—such nds—may be unlimited in dollar at limits the exemption to a particemption would be limited to the | emption you market valu as those fo amount. Ho icular dollar | u claim. One way of doing s e of the property being r health aids, rights to wever, if you claim an amount and the value of th |
| | description of the property an the characteristic description of the property and the characteristics are the characteristics. | the portion you own Copy the value from | Amount of the exemption you claim Check only one box for each exemption. | • | cific laws that allow exemption |
| | | Schedule A/B | | | |
| Brief descri | ption: Bank of America | \$0.00 | П | | 735 ILCS 5/12-1001(b) |
| Line fr | · | Ψ0.00 | ☐ 100% of fair market value, up to any | | |
| | 11 | | applicable statutory limit | | 705 II 00 5/40 4004/b) |
| Brief descri | ption: Bank of America Savings Account | \$0.00 | | | 735 ILCS 5/12-1001(b) |
| Line fr Sched | rom dule A/B:17 | | 100% of fair market value, up to any applicable statutory limit | | |
| (Subje | No | every 3 years after that for cas | 75? ses filed on or after the date of adjustment.) nin 1,215 days before you filed this case? | | |

No Yes

Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (140:49:57 Desc Main Docume Pitter Page 21 of 70

| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|--|---|------------------------------------|
| | | Copy the value from Schedule A/B | | |
| Brief description: | Netspend Prepaid Debit Card | \$10.00 | \$10.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 17 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Security Deposit: Woodland Park Apartments | \$1,100.00 | \$1,100.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 22 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Cook County Pension Account | \$0.00 | | 735 ILCS 5/12-1006 |
| Line from Schedule A/B: | 21 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Term Life Through Cook County | \$0.00 | | 735 ILCS 5/12-1001(f) |
| Line from Schedule A/B: | 31 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | 2010 Dodge Grand Caravan | \$6,775.00 | | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Used Furniture | \$500.00 | \$500.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Used Clothing | \$500.00 | \$500.00 | 735 ILCS 5/12-1001(a) |
| Line from Schedule A/B: | 11 | | 100% of fair market value, up to any | |

applicable statutory limit

| | | Case 16-01644 | Doc 1 Filed | 01/20/16 F | ntered 01/20 | /16 10:49:57 | Desc Main | |
|----------|---------------------------|---|------------------------------|------------------------|-----------------------|--|--|-----------------------------------|
| Fill i | n this informa | ation to identify your case: | | | Ŭ. | 10 10.40.01 | Desc Main | |
| Deb | tor 1 | Gwendolyn | | Daniels | | | | |
| | | First Name | Middle Name | Last Nam | e | | | |
| | tor 2 buse, if filing) | First Name | Middle Name | Last Nam | <u>e</u> | | | |
| Unit | ed States Ba | nkruptcy Court for the: <u>N</u> | orthern | District of Illino | | | | |
| | e number nown) | | | (Stat | e) | | | |
| <u> </u> | | orm 106D | | | | | | eck if this is a |
| Sc | hedul | e D: Credito | rs Who Hay | ve Claims | s Secured | by Prope | | 12/1 |
| | | te and accurate as pe | | | | | | |
| corr | ect inforn | nation. If more space top of any additional | is needed, copy t | he Additional | Page, fill it out, | number the entri | - | |
| 1. | Do any cred | ditors have claims secured | by your property? | | - | | | |
| | | eck this box and submit this f | | r other schedules. | ou have nothing else | to report on this form. | | |
| | = | ll in all of the information belo | · · | | 3 | | | |
| Part | = | II Secured Claims | | | | | | |
| | | | mare then one occurred | alaina liat tha aradit | or concretch for coch | Cak man A | Column B | Column C |
| | claim. If mor | red claims. If a creditor has e than one creditor has a par the claims in alphabetical or | rticular claim, list the oth | er creditors in Part 2 | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | PRESTIGE | FINANCIAL SVC | | | | \$15,807.00 | \$6,775.00 | \$9,032.00 |
| | Creditor's Na | | Describe the propert | y that secures the | claim: | ψ10,007.00 | φο,ττο.οο | φο,σοΣ.σο |
| | 1420 S 500 | | - 2010 Dodge Grand Ca | aravan Value: \$6.7 | 75.00 | | | |
| | Number | Street | As of the date you fil | | | | | |
| | | | Contingent | | | | | |
| | SALT LAKE | | Unliquidated | | | | | |
| | CITY | Utah 84115 State ZIP Code | Disputed | | | | | |
| | , | the debt? Check one. | Nature of lien. Check | all that apply. | | | | |
| | ✓ Debtor 1 | 1 only | | | , managa ay aga uyad | | | |
| | Debtor 2 | , | car loan) | u made (such as mo | ongage or secured | | | |
| | Debtor 1 | 1 and Debtor 2 only | Statutory lien (suc | h as tax lien, mech | anic's lien) | | | |
| | At least | one of the debtors and | Judgment lien from | | | | | |
| | another | | Other (including a | | | | | |
| | commu | if this claim relates to a inity debt vas incurred 9/1/2013 | Last 4 digits of acco | · | 2755 | | | |
| | | | | | | l #45.007.00 | | |
| | | Add the dollar value of you nere: | ır entries in Column A | on this page. Wr | ite that number | \$15,807.00 | | |

| Fill in this inform | Case 16-01644 nation to identify your case | | 01/20/16 | Entered 01 | /20/16 10:49 |):57 Desc | Main | |
|---|--|--|--|--|---|---|--|---|
| Debtor 1 | Gwendolyn First Name | Middle Name | Daniels Last Nar | | | | | |
| Debtor 2 (Spouse, if filing |) First Name | Middle Name | Last Nar | me | | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illing | | | | | |
| Case number (If known) | | | | | | _ | | |
| | orm 106E/F | ditors Who ł | Havo I In |) SOCUTO | l Claime | _ | k if this is an | amended filing |
| party to any exe 106A/B) and on are listed in <i>Scl</i> the boxes on th | ecutory contracts or une Schedule G: Executory nedule D: Creditors Who le left. Attach the Contin | le. Use Part 1 for creditors xpired leases that could re Contracts and Unexpired b Hold Claims Secured by ruation Page to this page. Y Unsecured Claims | esult in a claim. A Leases (Official Property. If more | Also list executory Form 106G). Do re e space is neede | y contracts on <i>Sci</i> not include any cr d, copy the Part y | hedule A/B: Propreditors with partions on need, fill it out | erty (Officia ally secured , number th | l Form I claims that e entries in |
| | editors have priority uns So to Part 2. | secured claims against you | u? | | | | | |
| identify wh possible, li Part 1. If n | at type of claim it is. If a clast the claims in alphabetic nore than one creditor hold | claims. If a creditor has mo aim has both priority and non al order according to the cred as a particular claim, list the daim, see the instructions for | priority amounts, li ditor's name. If you other creditors in F | ist that claim here a u have more than t Part 3. | and show both prior | ity and nonpriority a | mounts. As i | much as |
| · | , | | | , | | Total claim | Priority amount | Nonpriority amount |

Doc 1 Debtor 1 Document Page 24 of 70 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AD ASTRA RECOVERY SERV \$837.00 Last 4 digits of account number 7544 Nonpriority Creditor's Name When was the debt incurred? 7330 W 33RD ST N STE 118 4/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **WICHITA** Kansas 67205 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? No No Yes 4.2 AFNI, INC \$351.00 Last 4 digits of account number 6498 Nonpriority Creditor's Name PO BOX 3427 When was the debt incurred? 9/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **BLOOMINGTON** 61702 Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.3 CAP ONE NA \$791.00 Last 4 digits of account number 1591 Nonpriority Creditor's Name 10/1/2014 PO BOX 26625 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent RICHMOND Virginia 23261 Unliquidated Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset?

✓ No Yes Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (140/49:57 Desc Main First Name Middle Name Document Page 25 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.4 | City of Chicago Parking | — Last 4 digits of account number | \$700.00 |
| | Nonpriority Creditor's Name | <u> </u> | |
| | 121 N. LaSalle St # 107A Number Street | When was the debt incurred?n/a | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago Illinois 60602 | Contingent | |
| | City State Zip Code | — 🔲 Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | <u>✓</u> No | | |
| | Yes | | |
| 4.5 | Commonwealth Edison | — Last 4 digits of account number | \$950.00 |
| | Nonpriority Creditor's Name ATTN: Bankruptcy Department: 2100 Swift Drive | When was the debt incurred? n/a | |
| | Number Street | When was the dept incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Oak Brook Illinois 60523 | Contingent | |
| (| City State Zip Code | — 🔲 Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.6 | ENHANCED RECOVERY CO L | — Last 4 digits of account number 7373 | \$1,667.00 |
| | Nonpriority Creditor's Name 8014 BAYBERRY RD | When was the debt incurred? 10/1/2015 | |
| | Number Street | When was the dept incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | JACKSONVILLE Florida 32256 | Contingent | |
| | City State Zip Code | — 🔲 Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | | |
| | Yes | | |

Debtor 1 Gwend Gase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 As 3:57 Desc Main
First Name Document Page 26 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.7 | FEDLOAN | | \$3,526.00 |
| | Nonpriority Creditor's Name | — Last 4 digits of account number 0002 | |
| | POB 60610 Number Street | When was the debt incurred? 7/1/2013 | |
| | Trumber Street | As of the date you file, the claim is: Check all that apply. | |
| | LIADDICDUDO Dementrario 47400 | Contingent | |
| | HARRISBURG Pennsylvania 17106 City State Zip Code | — Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | | |
| | Yes | | |
| 4.8 | FST PREMIER | — Last 4 digits of account number 2901 | \$435.00 |
| | Nonpriority Creditor's Name 3820 N LOUISE AVE | When was the debt incurred? 1/1/2015 | |
| | Number Street | When was the dept incurred: | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | SIOUX FALLS South Dakota 57107 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | | |
| | ☐ Yes | | |
| 4.9 | LVNV FUNDING LLC | — Last 4 digits of account number 5280 | \$104.00 |
| | Nonpriority Creditor's Name PO BOX 740281 | When was the debt incurred? 10/1/2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | HOUSTON Texas 77274 | Contingent | |
| | City State Zip Code | — Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that | |
| | At least one of the debtors and another | you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify | |
| | ✓ No | | |
| | Yes | | |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.10 MEDICREDIT, INC \$40.00 Last 4 digits of account number 7073 Nonpriority Creditor's Name PO BOX 1629 When was the debt incurred? 9/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **MARYLAND** Montana 63043 Unliquidated **HEIGHTS** Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **V** No ☐ Yes 4.11 MID AM B&T C \$423.00 Last 4 digits of account number 0047 Nonpriority Creditor's Name 5109 S BROADBAND L When was the debt incurred? 4/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57109 Unliquidated Zip Code City State ☐ Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? ✓ No Yes 4.12 PEOPLES ENGY \$215.00 Last 4 digits of account number Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 11/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** 60601 Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

V No Yes

Is the claim subject to offset?

Other. Specify

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
|--|---|-------------|
| 4.13 TMobile Nonpriority Creditor's Name P.O. Box 742596 Number Street | Last 4 digits of account number 0178 When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. | \$864.00 |
| Cincinnati Ohio 45274 City State Zip Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |
| 4.14 WEBBANK/FINGERHUT FRES Nonpriority Creditor's Name 6250 RIDGEWOOD RD Number Street | Last 4 digits of account number 5280 When was the debt incurred? 11/1/2014 As of the date you file, the claim is: Check all that apply. | \$0.00 |
| SAINT CLOUD Minnesota 56303 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify | |

Debtor 1 Gwend Wase 16-01644
First Name

Gwend was e 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 (il. 0):49:57 Desc Main First Name Document Page 29 of 70

List Others to Be Notified About a Debt That You Already Listed

| collection agency is trying to collect from you for a debt | | | It your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection r for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you bbts in Parts 1 or 2, do not fill out or submit this page. |
|--|------------|----------|---|
| HARRIS & HARR | IS LTD | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 111 W JACKSON | BLVD S-400 | | Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | t | | Part 2: Creditors with Nonpriority Unsecured Claims |
| CHICAGO | Illinois | 60604 | Last 4 digits of account number |
| City | State | Zip Code | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

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First Name Document Place 30 of 70

| 6. Total the ar | nounts of certain types of unsecured claims. This information is for each type of unsecured claim. | or sta | atistical reporting purposes only. 28 U.S.C. §159. |
|--------------------------|---|--------|--|
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| ITOIII Part I | 6b. Taxes and certain other debts you owe the | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | l 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$10,903.00 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$10,903.00 |

| Fill in this informa | Case 16-0164 | | 01/20/16 | Entered 01/ | 20/16 10:49:57 | Desc Main | |
|--|-----------------------------|--|---------------------|----------------------|----------------------------|--|----|
| Debtor 1 | Gwendolyn First Name | Middle Name | Danie Last N | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last N | ame | | | |
| United States Ba Case number (If known) | ankruptcy Court for the: | Northern | District of III (\$ | inois State) | | | |
| , | Form 106G | | | | _ | Check if this is a amended filing | ar |
| Schedul | e G: Execut | ory Contracts | and Un | expired L | eases | 12/ | 15 |
| | , copy the additional p | | | | | ing correct information. If more onal pages, write your name and | |
| | • | contracts or unexpire m with the court with your ot | | ou have nothing else | to report on this form. | | |
| Yes. Fill in | n all of the information be | elow even if the contracts or | leases are listed | on Schedule A/B: Pi | operty (Official Form 106A | √B). | |
| | • | npany with whom you have nstructions for this form in the | | | | ase is for (for example, rent, and unexpired leases. | |
| Person | or company with whor | n you have the contract or | · lease | | State what the contrac | t or lease is for | |
| | | | | | | | |

| | | C 10 0104 | 4 Doo 1 Filed 0 | 1/20/10 Fistered | 01/00/10 10:40:57 | Dago Main |
|------|----------------------------|---|----------------------------------|------------------------------|----------------------------------|---|
| Fill | in this inform | Case 16-0164 ation to identify your cas | | 1/20/16 Enjered | 01/20/16 10:49:57 | Desc Main |
| De | btor 1 | Gwendolyn | | Daniels | | |
| | | First Name | Middle Name | Last Name | _ | |
| | btor 2 oouse, if filing | First Name | Middle Name | Last Name | _ | |
| Un | ited States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| | se number (nown) | | | (State) | _ | |
| , | · | | | | | Check if this is a amended filing |
| O | fficial F | Form 106H | | | | Ŭ |
| | | e H: Your Co | odebtors | | | 12/1: |
| 1. | No Yes Within the | last 8 years, have you | | ty state or territory? (Comm | | ries include Arizona, California, Idaho, |
| | ✓ No. G | o to line 3. | erto Rico, Texas, Washington, a | , | | |
| L | | lo | ouse, or legal equivalent live v | war you at the time: | | |
| | Y | es. In which community s | tate or territory did you live? | Fil | l in the name and current addres | ss of that person. |
| | | Name of your spouse, f | ormer spouse, or legal equivale | ent | _ | |
| | | Number Street | | | _ | |
| | | City | State | Zip Code | _ | |
| 3. | as a codeb | tor only if that person | s a guarantor or cosigner. N | lake sure you have listed th | | the person shown in line 2 again fficial Form 106D), <i>Schedule E/F</i> olumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in th | nis information to identify | your case: | | | 10:49:57 Des | sc Main | |
|------------------------|---|---|------------------------------|----------------------------|---------------------------------|---|--------------|
| Dobtor 1 | Curendelim | Docu | • | , 33 01 10 | | | |
| Debtor 1 | Gwendolyn First Name | Middle Name | Daniels Last Name | | | | |
| Debtor 2 | riiotranio | Wildalo Harrio | <u> Laot Harrio</u> | | Check if this is: | | |
| | if filing) First Name | Middle Name | Last Name | | An amended fi | ling | |
| United St | ates Bankruptcy Court for the: | Northern | District of Illinois (State) | | | showing post-petition f the following date: | n chapter 13 |
| Case nun (If known) | nber | | (Otate) | | MM / DD / YY | YY | |
| Offici | al Form 106I | | | | | | |
| Sche | dule I: Your Inc | ome | | | | | 12/15 |
| ages, v | vrite your name and ca | e. If more space is need se number (if known). A nt | | | Debtor 2 | p or any addition | Jilai |
| 1. | , | | Deptor 1 | | Deptor 2 | | |
| | information. | Employment status | ☐ Employed | | Employed | | |
| | If you have more than one | | ✓ Not Employed | | ✓ Not Employed | | |
| | job, attach a separate page with | | Not Employed | | Not Employee | J | |
| | information about additional | Occupation | | | | | |
| | employers. | Employer's name | | | | | |
| | Include part time, seasonal, | Employer's address | | | | | |
| | or self-employed work. | Employer's address | Number Street | | Number Street | | |
| | Occupation may include | | | | | | |
| | student | | | | | | |
| | or homemaker, if it applies. | | | | | | |
| | | | City | State Zip Code | City | State Zip Coo | de |
| | | How long employed there? | | | | | |
| Part 2: | Give Details About | Monthly Income | | | | | |
| | | | | | | | |
| Estimat are sepa | | date you file this form. If you h | ave nothing to report | for any line, write \$0 in | the space. Include your | non-filing spouse unl | less you |
| | | re than one employer, combine t | the information for all e | employers for that perso | on on the lines below. If y | ou need more space | , attach |
| a separa | ate sheet to this form. | | | For Debtor 1 | For Debtor 2 or non-filing spou | | |
| | List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be. | | | \$0.0 | 00 | \$0.00 | |
| 3. Es | 3. Estimate and list monthly overtime pay. 3. | | | + \$0.0 | 00 | + \$0.00 | |

4. Calculate gross income. Add line 2 + line 3.

\$0.00

\$0.00

Documentame Page 34 of 70 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4. \$0.00 \$0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations \$0.00 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. \$0.00 6. \$0.00 \$0.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation \$0.00 \$0.00 8d. 8e. Social Security \$0.00 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies \$0.00 \$0.00 Specify: 8f. 8g. Pension or retirement income \$1,956.39 \$0.00 8g. 8h. Other monthly income. Specify: 8h. + \$0.00 \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,956.39 \$0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$1.956.39 \$0.00 \$1.956.39 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Voluntary Household Contributions \$0.00 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$1,956.39 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No Yes. Explain:

Debtor 1 Gwendol Gase 16-01644

Doc 1

Filed 01/220/16

Entered @1/20/16 10:49:57 Desc Main

| | Case 16-0164 | 4 Doc 1 Filed 01 | /20/16 Entered 01/3 | 20/16 10:49:57 | Desc Main | | |
|---------------------------------|--|---|---|--------------------------|---------------------------|---------------------|--|
| Fill in this inform | ation to identify your case | 9: | <u> </u> | | | | |
| Debtor 1 | Gwendolyn | | Daniels | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Mistalla Nisasa | LastNama | Check if this is: | | | |
| (Spouse, il lilling) | First Name | Middle Name | Last Name | An amended fili | ng | | |
| United States Ba | ankruptcy Court for the: | Northern | District of Illinois | | howing post-petition of | chapter 13 | |
| Case number | | | (State) | expenses as or | the following date: | | |
| (If known) | | | | MM / DD / YYY | | | |
| Official F | orm 106J | | | _ | | | |
| | e J: Your Ex | nansas | | | | 12/1 | |
| | | • | | | | 12/1 | |
| | | | filing together, both are equally orm. On the top of any additiona | | | - | |
| | er every question. | ittach another sheet to this ic | orni. On the top of any additiona | ii pages, write your nam | e and case number | I | |
| Part 1: Desc | ribe Your Househo | old | | | | | |
| 1. Is this a joint | | | | | | | |
| ✓ No. Go t | o line 2 | | | | | | |
| Yes. Do | es Debtor 2 live in a se | parate household? | | | | | |
| | | F | | | | | |
| <u> </u> | No | | | | | | |
| L | <u> </u> | Official Forms 106J-2, Expense | es for Separate Household of Debto | or 2. | | | |
| 2. Do you have | = | | | | | | |
| Do not list De Debtor 2. | | s. Fill out this information for ch dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's | Does depende with you? | Does dependent live | |
| 200101 2. | | ion dopondon | Relative | age 10 years | No. | | |
| | | | Tolavo | | Yes. | | |
| 3. Do your expe | enses include | | | | | | |
| • | people other | 0 | | | | | |
| than yourself and | your Ye | es | | | | | |
| dependents | ? | | | | | | |
| Part 2: Estim | ate Your Ongoing | Monthly Expenses | | | | | |
| | | | ou are using this form as a supp | element in a Chanter 13 | case to report | | |
| • | a date after the bankr | | lemental Schedule J, check the | • | • | | |
| • | • | ash government assistance if on Schedule I: Your Income | - | | Your | expenses | |
| | r home ownership expethe ground or lot. 4. | enses for your residence. Incl | ude first mortgage payments and | | 4. | \$1,100.00 | |
| If not inclu | ded in line 4: | | | | | | |
| 4a. Real est | ate taxes | | | | 4a _ | \$0.00 | |
| 4b. Property | , homeowner's, or renter | 's insurance | | | 4b | \$0.00 | |
| 4c. Home m | aintenance, repair, and up | okeep expenses | | | 4c. | \$0.00 | |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Gwend @ase 16-01644 Doc 1 Filed 01/20/16 Entered @1/20/16 /160:49:57 Desc Main

Document Page 36 of 70 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$50.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$20.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$100.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$10.00 9. 10. Personal care products and services \$10.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$25.00 Do not include car payments 12. 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$100.00 15c 15d. Other insurance. Specify: _ \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 \$0.00 17b 17c. Other. Specify: Monthly Federal Tax Payment for Pension \$90.64 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. 20b \$0.00 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1 | Gwend (Grase 16-01644) | Doc 1 | Filed 01/20/16 | <u>Entered</u> @1/20/16 /160:49: <u>5</u> | 7 D | esc Main | |
|-------------------|--|--------------------|-----------------------------|---|-----|----------|------------|
| | First Name | Middle Name | Documetht ^{me} | Page 37 of 70 | | | |
| 21. Other. | Specify: | | | | 21 | | \$0.00 |
| | | | | | | | |
| 22. Calcul | ate your monthly expenses. | | | | | | \$1,505.64 |
| 22a. Ad | dd lines 4 through 21. | | | | | | \$0.00 |
| 22b. C | opy line 22 (monthly expenses for | r Debtor 2), if an | y, from Official Form 106J- | 2 | | | \$1,505.64 |
| 22c. Ad | dd line 22a and 22b. The result is | your monthly ex | penses. | | 22. | | |
| 23. Calcula | ate your monthly net income. | | | | | | |
| 23a. Co | opy line 12 (your combined month | nly income) from | Schedule I. | | 23a | | \$1,956.39 |
| 23b. Co | opy your monthly expenses from li | ne 22 above. | | | 23b | _ | \$1,505.64 |
| | ubtract your monthly expenses from | | income. | | | | \$450.75 |
| Т | he result is your monthly net inco | me. | | | 23c | | |
| 24. Do yo | u expect an increase or decrea | se in your exp | enses within the year aft | er you file this form? | | | |
| | kample, do you expect to finish pa age payment to increase or decre | | | | | | |
| ✓ N | 0 | | | | | | |
| ☐ Ye | es | | | | | | |
| | Explain here: | | | | | | |
| | | | | | | | |

| | | Case 16-0164 | 4 Doc 1 Filed 0 | 1/20/16 Ento | red 01/20/16 10:49:57 | Doce Main |
|------|-----------------------------------|---|-------------------------------|------------------------------------|---|-----------------------------------|
| Fill | in this inforr | nation to identify your cas | | 1/2(-10 1- - | 120/10 10.49.57 | Desc Main |
| Del | otor 1 | Gwendolyn | | Daniels | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 ouse, if filing | g) First Name | Middle Name | Last Name | | |
| Uni | ted States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| 0 | | . , | | (State) | | |
| | se number nown) | | | | | |
| Of | ficial | Form 106De | eC | | | Check if this is a amended filing |
| De | clara | tion About a | n Individual De | btor's Sche | dules | 12/1 |
| f tw | o married p | people are filing togethe | er, both are equally responsi | ble for supplying corr | ect information. | |
| | , and 3571. t 1: Sigr Did you p | | eone who is NOT an attorney | to help you fill out ba | nkruptcy forms? | |
| | ✓ No | | | | | |
| | Yes. | Name of person | | Attach Bankrup Signature (Offic | otcy Petition Preparer's Notice, Decla Sial Form 119). | ration, and |
| × | that they | are true and correct. dolyn Daniels | e that I have read the summa | * | d with this declaration and ature of Debtor 2 | |
| | Date 1/20 | /2016 /DD/YYYY | | Date | MM/DD/YYYY | |
| | 141141 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | 141141/00/1111 | |

| Filli | in this info | Case 16-01644 ormation to identify your case | | Filed 01/20/16 | Entered 01/2 | 20/16 10:49:57 | Desc Main |
|-------|------------------------|---|-----------------------|------------------------------|---------------------|---------------------------|---|
| Deb | otor 1 | Gwendolyn First Name | Middle | Daniels Name Last Na | | | |
| | otor 2 ouse, if fil | ling) First Name | Middle | | | | |
| | | s Bankruptcy Court for the: | Northern | District of Illin | nois | | |
| | se numbe nown) | er | | (St | ate) | | |
| Of | ficial | Form 107 | | | | 1 | Check if this is a amended filing |
| Sta | atem | ent of Financi | | | _ | - | • |
| | | | | | | | ing correct information. If more r (if known). Answer every question |
| Par | t 1: Gi | ve Details About Your | Marital Status | and Where You Liv | ed Before | | |
| 1. | What | is your current marital sta | atus? | | | | |
| | | Married Not married | | | | | |
| 2. | Durin | g the last 3 years, have you | u lived anywhere | other than where you live | now? | | |
| | | No 'es. List all of the places you li | ived in the last 3 ye | ars. Do not include where y | ou live now. | | |
| | D | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| | | | | | Same as De | ebtor 1 | Same as Debtor 1 |
| | N | lumber Street | | From | Number Street | <u> </u> | From |
| | _ | | | To | | | To |
| | C | City State | Zip Code | _ | City | State Zip C | ode |
| | | | | | Same as De | ebtor 1 | Same as Debtor 1 |
| | N | lumber Street | | From | Number Street | : | From |
| | _ | | | To | | | To |
| | C | City State | Zip Code | _ | City | State Zip C | ode |
| 3. | | | - | • . | | • | (Community property states and |
| | ▼ No | es include Arizona, California, | iuaiio, Louisiafia, | rvevaua, rvew iviexico, Puel | no nico, lexas, was | mingion, and vvisconsin.) | |
| | Yes | s. Make sure you fill out Scheo | dule H: Your Codel | otors (Official Form 106H). | | | |

| 1 | Debtor ' | 1 Gwend (Gase 16-01644 D | oc 1 Filed 01/20/16 | 5 Entered 01/20/ | 1166/1140i49: <u>57 Desc</u> | : Main |
|---|----------|---|--|---|--|---|
| | | - · · · · · · · · · · · · · · · · · · · | Documetht Documetht | Page 40 of 70 | | |
| G | Part 2: | Explain the Sources of Your I | ncome | | | |
| 4 | Fill | d you have any income from employm in the total amount of income you receive ivities. If you are filing a joint case and you No Yes. Fill in the details. | ed from all jobs and all businesses | , including part-time | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | | Wages, commissions, bonuses, tips Operating a business | |
| | - | For last calendar year: | ✓ Wages, commissions, bonuses, tips | \$40000.00 | Wages, commissions, bonuses, tips | |

5. Did you receive any other income during this year or the two previous calendar years?

2015

2014

YYYY

(January 1 to December 31,

For last calendar year:

(January 1 to December 31,

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

\$60000.00

Operating a business

Wages, commissions,

Operating a business

bonuses, tips

| List each source and the gross income from e | each source separately. Do not | include income that you listed | in line 4. |
|--|--------------------------------|--------------------------------|------------|
| No ✓ Yes. Fill in the details. | | | |
| | Debtor 1 | | Debtor 2 |
| | Sources of income | Gross income from | Sources of |

Operating a business

Operating a business

✓ Wages, commissions,

bonuses, tips

| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
|---|--------------------------------------|--|--------------------------------------|--|
| From January 1 of current year until the date you filed for bankruptcy: | PENSION | \$1956.00 | | |
| For last calendar year: (January 1 to December 31,2015)YYYY | Pension | \$11738.00 | | |
| For last calendar year: (January 1 to December 31, | | | | |

Debtor 1 Gwend Wase 16-01644 First Name Filed 01/20/16 Entered 01/20/16 160:49:57 Desc Main Doc 1

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Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| Are eith | er Debtor 1's o | r Debtor 2's | debts primarily con | sumer debts? | | | |
|----------|-----------------|---------------------------------|--|---|---|--------------------------------|-------------------------------|
| ✓ No. | | | or 2 has primarily c sehold purpose." | onsumer debts. Cons | sumer debts are defined in | 11 U.S.C. § 101(8) as "incurro | ed by an individual primarily |
| | During the 90 o | days before yo | ou filed for bankruptcy, | did you pay any credito | or a total of \$6,225* or more | ? | |
| | ✓ No. Go to | line 7. | | | | | |
| | tota | l amount you | paid that creditor. Do | not include payments for | more in one or more payme or domestic support obligati attorney for this bankruptcy | ons, such as | |
| | * Subject to ad | justment on 4/ | 01/16 and every 3 yea | ars after that for cases f | iled on or after the date of a | djustment. | |
| Yes. | . Debtor 1 or D | ebtor 2 or bo | oth have primarily o | onsumer debts. | | | |
| _ | During the 90 o | days before yo | ou filed for bankruptcy, | did you pay any credito | or a total of \$600 or more? | | |
| | No. Go to | | | , | | | |
| | Yes. List | below each cr creditor. Do r | not include payments | | ore and the total amount you oligations, such as child sup ankruptcy case. | • | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | editor's Name | | | | - | | Mortgage Car Credit card |
| | arribor Otroct | | | | | | Loan repayment Suppliers or |
| Cit | ty | State | Zip Code | | | | vendors Other |
| Cre | editor's Name | | | | | | ─ |
| Nu | ımber Street | | | | | | Credit card Loan repayment |
| Cit | ty | State | Zip Code | | | | Suppliers or vendors |
| | | | | | | | Other |
| Cre | editor's Name | | | | | | ─ |
| Nu | ımber Street | | | | | | Credit card Loan repayment |
| Cit | ty | State | Zip Code | | | | Suppliers or vendors Other |

Gwend Grase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 160:49:57 Desc Main Debtor 1 Document Page 42 of 70 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Gwend Wase 16-01644 First Name Filed 01/20/16 Entered 01/20/16 (140:49:57 Desc Main Doc 1

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

| | such matters, includ | filed for bankruptcy, wo | | | | | | tody modifications, | and contract |
|-----|---|----------------------------|----------|--|---------------------------|-----------|----------|---------------------|--------------|
| ✓ N | lo es. Fill in the details. | | | | | | | | |
| | | | Nature o | of the case | Court or ag | ency | | Status of the ca | se |
| | Case title | | | | | | | Pending | |
| | - | | | | Court Name | | | On appeal | |
| | Case number | | | | Number Stre | eet | | Concluded | |
| | | | | | City | State | Zip Code | - | |
| | Case title | | | | | | • | Pending | |
| | | | | | Court Name | | | On appeal | |
| | Case number | | | | | | | Concluded | |
| | | | | | Number Stre | eet | | | |
| | | | | | City | State | Zip Code | = | |
| | Yes. Fill in the inform Creditor's Name Number Street City | ation below. State Zip Co | ode | Explain what happed Property was reproperty was at | ened possessed. reclosed. | r levied | Date | Value of t property | he |
| | | | | Describe the prope | | l levieu. | Date | Value of t | ho |
| | | | | Describe the prope | ri ty | | Date | property | ile |
| | | | | | | | | | |
| | Creditor's Name | | | | | | | | |
| | Number Street | | | Explain what happe | ened | | | | |
| | INUTIDEI STEET | | | Droportos | 20000004 | | | | |
| | City | State 7:- 0- | | Property was re | | | | | |
| | City | State Zip Co | oue | Property was for | | | | | |
| | | | | | ached, seized, o | r levied. | | | |
| | | | | | ,, | | | | |

| Deb | tor 1 | | <u>d 01½0/16 Entered</u> 01/20/16 /10:49: cumenterne Page 44 of 70 | 57 Desc | <u>Main</u> |
|------|----------|--|--|--------------------------|-------------------------|
| 11. | | ounts or refuse to make a payment because you owe | creditor, including a bank or financial institution, set of ed a debt? | f any amounts fr | om your |
| | Ц | Yes. Fill in the details. | Describe the property | Date | Value of the property |
| | | Creditor's Name | | | |
| | | Number Street | Leat 4 digits of account purplicus VVVV | | |
| 40 | \A/:4L | City State Zip Code | Last 4 digits of account number: XXXX- | a banasis as avadi | tore a count annointed |
| 12. | rece | iver, a custodian, or another official? | f your property in the possession of an assignee for the | e benefit of creal | tors, a court-appointed |
| | | No Yes | | | |
| Part | 5: | List Certain Gifts and Contributions | | | |
| 13. | Wi | thin 2 years before you filed for bankruptcy did you | give any gifts with a total value of more than \$600 per p | person? | |
| .0. | √ | No | give any give man a total value or more than 4000 per p | | |
| | | | give any give min a total raide or more than \$660 per p | | |
| .0. | | No | Describe the gifts | Dates you gave the gifts | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street | | Dates you | Value |
| | | No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift | | Dates you | Value |

| | 1 list Name | ocument Page 45 of 70 | | |
|----------|---|--|-------------------------|------------------------|
| 14. W | | ı give any gifts or contributions with a total value of mo | re than \$600 to ar | ny charity? |
| √ | l No | | | |
| Ľ | Yes. Fill in the details for each gift or contribution. | | | |
| _ | Gifts with a total value of more than \$600 | Describe the gifts | Dates you | Value |
| | per person | Docorino uno ginto | gave the gifts | raido |
| | | | | |
| | Charity's Name | - | | |
| | · | _ | | |
| | | _ | | |
| | Number Street | | | |
| | City State Zip Code | _ | | |
| | City State Zip Code | | | |
| Part 6: | List Certain Losses | | | |
| 45 VAC | | | of the oft fine other | lit |
| | thin 1 year before you filed for bankruptcy or since ynbling? | you filed for bankruptcy, did you lose anything because | of theft, fire, othe | r disaster, or |
| 9 | · | | | |
| <u> </u> | No | | | |
| | Yes. Fill in the details. | | | |
| | Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
| | now the loss occurred | Include the amount that insurance has paid. List pending | 1033 | |
| | | insurance claims on line 33 of Schedule A/B: Property. | | |
| | | | | |
| | | | | - |
| Inc | No | dit counseling agencies for services required in your bankrupt | су. | |
| ✓ | Yes. Fill in the details. | | | |
| | | Description and value of any property transferred | Date payment | Amount of payment |
| | | | or transfer was made | |
| | The Semrad Law Firm | - 400.00 | 1/20/2016 | \$400.00 |
| | Person Who Was Paid | - | | * |
| | 20 S. Clark # 28 | _ | | |
| | Number Street | | | |
| | Chicago Illinois 60603 | - | | |
| | Chicago Illinois 60603 City State Zip Code | - | | |
| | | _ | | |
| | Email or website address | | | |
| | Person Who Made the Payment, if Not You | - | | |
| | | | 1 | |
| | Person Who Was Paid | - | | |
| | N. J. O. J. | _ | | |
| | Number Street | | | |
| | | - | | |
| | City State Zip Code | - | | |
| | | _ | | |
| | Email or website address | | | |
| | Person Who Made the Payment, if Not You | - | | |
| | - 5.5011 WHO Made the Fayment, II NOT TOU | | 1 | |

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| Person Who Was Paid Number Street City State Zip Code Person's relationship to you Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) Ves. Fill in the details. Description and value of the property transferred Person Who Was Paid Number Street Zip Code Person's relationship to you Description and value of the property transferred Person Who Was Paid Number Street Description and value of the property transferred | Deb | tor 1 | Gwend Grase 16-01644 First Name | Doc 1 Filed Middle Name Do | | Entered @1/20 Page 46 of 70 | /16 /160:49: | 57 Desc | Main | |
|---|-----|----------------|---|----------------------------|-------------------|--------------------------------|---------------------|--------------------|-----------|------------------------|
| Person Who Was Paid | 17. | you | deal with your creditors or to ma | ake payments to you | r creditors? | ng on your behalf pay o | r transfer any p | roperty to anyor | ne who p | promised to help |
| Person Who Was Paid Number Street City State Zip Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred ordinary course of your business or financial affairs? Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gift transfers that you have already listed on this statement. No Yes. Fill in the details. Description and value of any property or payments received or debts paid in exchange Person Who Was Paid Number Street City State Zip Code Person's relationship to you Person Who Was Paid Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefit (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date was it in the details. | | ✓ | | | | | | | | |
| Number Street City State Zip Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferror ordinary course of your business or financial affairs? Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gift transfers that you have already listed on this statement. No Ses. Fill in the details. Description and value of any property or payments received or debts paid in exchange was in the person's relationship to you. Person Who Was Paid Number Street City State Zip Code Person's relationship to you. Person's relationship to you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No No Sescription and value of the property transferred Date was in the details. Description and value of the property transferred Date was in the details. | | | | | Description and | I value of any property | transferred | or transfer | Amoui | nt of payment |
| State Zip Code | | | Person Who Was Paid | | | | | | | |
| 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred ordinary course of your business or financial affairs? Include both outright transfers that you have already listed on this statement. No No No Ses. Fill in the details. Description and value of any property or payments received or debts paid in exchange Person Who Was Paid Number Street City State Zip Code Person's relationship to you Person Who Was Paid Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefit (These are often called asset-protection devices.) Description and value of the property transferred Date was in the details. Description and value of the property transferred Date was in the details. Description and value of the property transferred Date was in the details. | | | Number Street | _ | | | | | | |
| ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gift transfers that you have already listed on this statement. No | | | City State | Zip Code | | | | | | |
| Person Who Was Paid Number Street City State Zip Code Person's relationship to you Person Who Was Paid Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Person Who Was Paid Number Street City State Zip Code Person's relationship to you Description and value of the property transferred Date was in the details. | | Inclu trans | de both outright transfers and transfers that you have already listed on No | sfers made as security | (such as the gran | iting of a security interest | or mortgage on y | your property). Do | not inclu | ude gifts and |
| Number Street City State Zip Code Person's relationship to you Person Who Was Paid Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefit (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date was in | | | | | | | | | | Date transfer was made |
| City State Zip Code Person's relationship to you Person Who Was Paid Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date was in | | | Person Who Was Paid | | | | | | | |
| Person's relationship to you Person Who Was Paid Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date was in | | | Number Street | _ | | | | | | |
| Number Street City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date was in | | | , | Zip Code | | | | | | |
| City State Zip Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No Yes. Fill in the details. Description and value of the property transferred Date was in the details of the property transferred | | | Person Who Was Paid | | | | | | | |
| Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a benefic (These are often called asset-protection devices.) No | | | Number Street | | | | | | | |
| (These are often called asset-protection devices.) ✓ No ☐ Yes. Fill in the details. Description and value of the property transferred was in the content of the pr | | | , | Zip Code | | | | | | |
| Yes. Fill in the details. Description and value of the property transferred was in the details. | 19. | | | | ransfer any prop | perty to a self-settled tru | st or similar de | vice of which yo | u are a l | peneficiary? |
| Description and value of the property transferred Date was i | | | | | | | | | | |
| Name of trust | | Ц | res. Fill in the details. | | Description an | d value of the property | transferred | | | Date transfer was made |
| | | | Name of trust | | | | | | | |
| | | | | | | | | | | |

Debtor 1 Gwend Wase 16-01644 First Name
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 Doc 1

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| No Yes. Fill in the details. Last 4 digits of account number Type of account or instrument XXXX- Person Who Was Paid Number Street City State Zip Code XXXX- Person Who Was Paid Person Who Was Paid XXXX- Checking Savings Money market Brokerage Other XXXX- Checking Savings Money market Person Who Was Paid Savings Money market | Date account was closed, sold, moved, or transferred |
|---|--|
| Person Who Was Paid Number Street City State Zip Code Person Who Was Paid Person Who Was Paid Number Street XXXX- Checking Savings Money market Brokerage Other Checking Savings Money market Savings Money market | was closed, before closing sold, moved, or transfer |
| Person Who Was Paid Savings Money market Brokerage Other Person Who Was Paid Number Street XXXX- Money market Savings Money market Money market Money market | |
| City State Zip Code Brokerage Other Person Who Was Paid Number Street Brokerage Other XXXX- Checking Savings Money market | |
| Person Who Was Paid Number Street XXXX- Checking Savings Money market | |
| Person Who Was Paid Number Street Savings Money market | |
| Number Street Money market | |
| ☐ Brokerage | |
| City State Zip Code Other | |
| valuables? No Yes. Fill in the details. Who else had access to it? Describe the cor | ntents Do you still have it? |
| Name of Financial Institution Name | □ No |
| Number Street Number Street | Yes |
| City State Zip Code City State Zip Code | |
| 2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankru | uptcy? |
| ✓ No ✓ Yes. Fill in the details. | |
| Who else had access to it? Describe the cor | ntents Do you still have it? |
| Name of Storage Facility Name | ☐ No ☐ Yes |
| Number Street Number Street | ☐ 1es |
| City State Zip Code City State Zip Code | |

| Part | | Liland Char Burnanta Variable | | | | | | |
|------|-------|--|--|---|--|-------------------|---|------------------|
| | Do y | Identify Property You Ho you hold or control any proper No Yes. Fill in the details. | | | | pperty you borro | owed from, are storing for, or hold in tro | ust for someone. |
| | | roo. I iii iii alo dotaiio. | | Where is the | he property? | | Describe the contents | Value |
| | | | | | | | | |
| | | Owner's Name | | Number St | reet | | | |
| | | Number Street | | City | State | Zip Code | - | |
| | | | | _ | | · | | |
| | | City State | Zip Code | | | | | |
| Part | 10: | Give Details About Env | ironmental In | formation | | | | |
| For | the p | ourpose of Part 10, the following d | efinitions apply: | | | | | |
| | ha | invironmental law means any fede azardous or toxic substances, wa acluding statutes or regulations co | stes, or material ir | nto the air, land | d, soil, surface w | ater, groundwater | | |
| | or | tite means any location, facility, or rused to own, operate, or utilize in the day and the | it, including disposing an environment | sal sites. al law defines a | as a hazardous v | • | | |
| | Has | Il notices, releases, and proceedir any governmental unit notifie | | - | | occurred. | | |
| | Ħ | No Yes. Fill in the details. | | | or potentially li | able under or in | violation of an environmental law? | |
| | Ħ | No Yes. Fill in the details. | | Governme | | able under or in | violation of an environmental law? Environmental law, if you know it | Date of notice |
| | ä | Yes. Fill in the details. | | | ental unit | able under or in | | Date of notice |
| | ä | | | Governmen | ental unit | able under or in | | Date of notice |
| | Ï | Yes. Fill in the details. | | | e ntal unit utal unit | able under or in | | Date of notice |
| | | Yes. Fill in the details. Name of site | Zip Code | Governmen | e ntal unit utal unit | able under or in | | Date of notice |
| 25 | | Yes. Fill in the details. Name of site Number Street City State | | Governmen Number Str | ental unit Ital unit reet State | Zip Code | | Date of notice |
| 25. | Have | Yes. Fill in the details. Name of site Number Street | | Governmen Number Str | ental unit Ital unit reet State | Zip Code | | Date of notice |
| 25. | Have | Yes. Fill in the details. Name of site Number Street City State re you notified any governmen | | Governmen Number Str | ental unit reet State ardous material | Zip Code | | Date of notice |
| 25. | Have | Yes. Fill in the details. Name of site Number Street City State re you notified any governmen | | Governmen Number Str City | ental unit reet State ardous material | Zip Code | Environmental law, if you know it | |
| 25. | Have | Yes. Fill in the details. Name of site Number Street City State re you notified any governmen No Yes. Fill in the details. | | Governmen Number Str City clease of haza | ental unit reet State ardous material ental unit | Zip Code | Environmental law, if you know it | |

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| Debt | or 1 | Gwend Gwase 16-016 First Name | 44 Doc 1 Middle Name | <u>-iled 01/20/16 </u> | <u>Entered</u> @14/20 age 49 of 70 | M16/AQi49: <u>57</u> | Desc Main |
|------|----------|---|-----------------------------|--|---------------------------------------|------------------------|---|
| 26. | Hav | e you been a party in any j | udicial or administra | tive proceeding under an | y environmental law | ? Include settlements | and orders. |
| | V | No Silling to the in- | | | | | |
| | Ц | Yes. Fill in the details. | | Court or agency | | Nature of the case | Status of the |
| | | | | 0 , | | | case |
| | | Case title | | Court Name | | | Pending |
| | | | | | | | On appeal |
| | | | | Number Street | | | Concluded |
| | | Case number | | City State | Zip Code | | |
| Part | 11: | Give Details About Yo | our Business or | Connections to Any | Business | | |
| 27. | With | nin 4 years before you filed | I for bankruptcy, did | you own a business or ha | ve any of the follow | ing connections to any | / business? |
| | | A sole proprietor or self | -employed in a trade, r | profession, or other activity, o | either full-time or part- | time | |
| | | A member of a limited li | iability company (LLC) | or limited liability partnershi | • | | |
| | | A partner in a partnersh An officer, director, or m | | a corporation | | | |
| | | | | securities of a corporation | | | |
| | ✓ | No. None of the above applie | es. Go to Part 12. | | | | |
| | | Yes. Check all that apply abo | ove and fill in the details | | | | |
| | | | | Describe the natur | e of the business | | entification number Do not all Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | | | | | | |
| | | Number Street | | Name of accounta | nt or bookkeeper | Dates busine | ss existed |
| | | City State | Zip Code | | | From | To |
| | | | | | | | |
| | | | | Describe the natur | e of the business | Employer Ide | entification number Do not |
| | | | | | | include Socia | al Security number or ITIN. |
| | | Business Name | | | | EIN: | |
| | | Number Street | | | | Dates busine | ss existed |
| | | | | Name of accounta | nt or bookkeeper | _ | _ |
| | | City State | Zip Code | | | From | То |
| | | | | | | | |
| | | | | Describe the natur | e of the business | | entification number Do not all Security number or ITIN. |
| | | | | | | EIN: | a occurry number of frist. |
| | | Business Name | | | | | |
| | | Number Street | | Name of accounta | nt or bookkeeper | Dates busine | ss existed |
| | | City State | Zip Code | | | From | To |
| | | , 5446 | p | | | | <u> </u> |
| | | | | | | | |

| Debtor | | <u>ed 01½0/116 Entered </u> 01./20/116 /1.ଭ:49: <u>57 Desc Main</u> ocum e ntee Page 50 of 70 | _ |
|----------|---|--|---|
| | | give a financial statement to anyone about your business? Include all financial institutions, | |
| | Yes. Fill in the details below. | | |
| _ | _ | Date issued | |
| | Name | MM/DD/YYYY | |
| | Number Street | _ | |
| | City State Zip Code | _ | |
| Part 12 | Sign Below | | |
| an | d correct. I understand that making a false statement, or | Affairs and any attachments, and I declare under penalty of perjury that the answers are true, concealing property, or obtaining money or property by fraud in connection with a prisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | |
| | Signature of Debtor 1 | Signature of Debtor 2 | |
| | Date 1/20/2016 | Date 1/20/2016 | |
| ✓ | No Yes | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | |
| Did | d you pay or agree to pay someone who is not an attorr | rney to neip you till out bankruptcy forms? | |
| | No Yes. Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| n re | Gwendolyn Daniels; | | Case No. | |
|------|---|---|-----------------------------|--------------------------------|
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF | COMPENSATION OF ATTO | ORNEY FOR D | EBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 year before the filing of the petition in bankruptcy, or a in connection with the bankruptcy case is as follows: | | | |
| | For legal services, I have agreed to accept | | | \$4,000.00 |
| | Prior to the filing of this statement I have received | | | \$400.00 |
| | Balance Due | | | \$3,600.00 |
| 2. | The source of the compensation paid to me was: Debtor | Other (specify) | | |
| 3. | The source of the compensation paid to me is: Debtor | Other (specify) | | |
| 4. | I have not agreed to share the above-disclosed members and associates of my law firm. | compensation with any other person unless they | are | |
| | I have agreed to share the above-disclosed con members or associates of my law firm. A copy of the people sharing in the compensation, is attack | f the agreement, together with a list of the name | | |
| 5. | In return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, a | | | n in bankruptcy; |
| | b. Preparation and filing of any petition, sched | ules, statements of affairs and plan which may b | pe required; | |
| | c. Representation of the debtor at the meeting | of creditors and confirmation hearing, and any | adjourned hearings there | eof; |
| | d. Representation of the debtor in adversary p | oceedings and other contested bankruptcy mat | ters; | |
| 6. | By agreement with the debtor(s), the above-disclose | d fee does not include the following services: | | |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of an eedings. | y agreement or arrangement for payment to m | e for representation of the | e debtor(s) in this bankruptcy |
| | 1/20/2016 | /s/ Michael | Spangler 6310219 | |
| | Date | Signatu | ure of Attorney | |
| | | Semr | ad Law Firm | |
| | | Nam | e of law firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Gwendolyn Daniels ; | | Case No. | |
|------------|--|---|--|---------------------------------------|
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| 1. | DISCLOSURE OF Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 year before the filing of the petition in bankruptcy, or in connection w ith the bankruptcy case is as follows: | agreed to be paid to me, for services re | the abovenamed deblor(s) and the | at componentian haid to me within one |
| | For legal services, I have agreed to accept | | | \$4,000.00 |
| | Prior to the filing of this statement I have received | | | \$400.00 |
| | Balance Due | | | \$3,600.00 |
| 2. | The source of the compensation paid to me was: Debtor | Other (specify) | | |
| 3. | The source of the compensation paid to me is: Debtor | Other (specify) | | |
| 4. | I have not agreed to share the above-disclosed members and associates of my law firm. | compensation with any other person unl | ess they are | |
| | I have agreed to share the above-disclosed commembers or associates of my law firm. A copy the people sharing in the compensation, is attached | of the agreement, together with a list of the | ns who are not ne names of | |
| 5. | In return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, | o render legal service for all aspects of and rendering advice to the debtor in det | the bankruptcy case, including: ermining whether to file a petition | in bankruptcy; |
| | b. Preparation and filing of any petition, scher | ules, statements of affairs and plan whic | h may be required; | |
| | c. Representation of the debtor at the meeting | of creditors and confirmation hearing, a | nd any adjourned hearings thereo | of; |
| | d. Representation of the debtor in adversary p | roceedings and other contested bankrup | tcy matters; | |
| 6. | By agreement with the debtor(s), the above-disclose | d fee does not include the following serv | ices: | |
| | | CERTIFICATION | | |
| l proce | certify that the foregoing is a complete statement of a edings. | y agreement or arrangement for payme | nt to me for representation of the | debtor(s) in this bankruptcy |
| | 1/15/2016 | Isl M | ichael Spangler 6310219 | THE |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate



tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- Before signing this agreement, the attorney has received, \$ 400.00 toward the flat fee, leaving a balance due of \$ 3987.00 ; and \$ 77.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —th•Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$310 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$235 | filing fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 10:49:57 Desc Main UNITED STATES BANKBURG OF POURT Northern District of Illinois

| In re: | Daniels, Gwendolyn ; | Case No. | Case No | | |
|--------|---|---|--|--|--|
| _ | Debtor(s) | | | | |
| | | Chapter. | Chapter13 | | |
| | VERIFIC | CATION OF CREDITOR MATE | RIX | | |
| | The above named Debtors hereby verify the | nat the attached list of creditors is true an | d correct to the best of their knowledge | | |
| | | | | | |
| Date: | 1/20/2016 | /s/ Daniels, Gwendol | yn | | |
| | | Daniels, Gwendolyn | | | |
| | | Signature of Debtor | | | |
| | | | | | |
| | | /s/ | | | |
| | | Signature of Joint De | ebtor | | |

PRESTIGE FINANCIAL SG:01644 Doc 1 Filed 01/20/16 Entered 01/20/16 10:49:57 Desc Main
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SALT LAKE CITY, 84115

FEDLOAN POB 60610 HARRISBURG, 17106

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, 32256

AD ASTRA RECOVERY SERV 7330 W 33RD ST N STE 118 WICHITA, 67205

CAP ONE NA PO BOX 26625 RICHMOND, 23261

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, 57107

MID AM B&T C 5109 S BROADBAND L SIOUX FALLS, 57109

AFNI, INC. PO BOX 3427 BLOOMINGTON, 61702

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, 60601

LVNV FUNDING LLC PO Box 10497 Greenville, 29603

MEDICREDIT, INC PO BOX 1629 MARYLAND HEIGHTS, 63043

WEBBANK/FINGERHUT FRES 6250 RIDGEWOOD RD SAINT CLOUD, 56303

Commonwealth Edison ATTN: Bankruptcy Department: 2100 Swift Drive Oak Brook, 60523

TMobile P.O. Box 742596 Cincinnati, 45274

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, 60602

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO, 60604

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| Debtor 1 Gwendo Case 16 | -01644 Doc 1 Filed 0 | 1/20/16 Entered 01, ment Page 66 of 7 | /20/16 10:49:57 | Desc Main |
|---|---|--|---|--|
| | uestions for Reporting Purpo | • | O | |
| 16. What kind of debts do you have? | 16a. Are your debts primari as "incurred by an indivi No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primari | ily consumer debts? Cons idual primarily for a persona ily business debts? Busine ness or investment or throu | al, family, or household ess debts are debts th gh the operation of the | d purpose." nat you incurred to e business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be avai No. Yes. e | er 7. Go to line 18. Do you estimate that after any exe lable to distribute to unsecured cred | mpt property is excluded and ditors? | d administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 50 | 5,001-50,000 9,001-100,000 ore than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million | 500,000,001-\$1 billion 5,000,000,001-\$10 billion 0,000,000,001-\$50 billion ore than \$50 billion |
| 20. How much do you estimate your liabilities to be? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50 | million | 00,000,001-\$1 billion ,000,000,001-\$10 billion 0,000,000,001-\$50 billion ore than \$50 billion |
| Pan 76 Sign Below | | | | |
| For you | I have examined this petition, and correct. If I have chosen to file under (or 13 of title 11, United States proceed under Chapter 7. If no attorney represents me a fill out this document, I have o | Chapter 7, I am aware that Code. I understand the relined I did not pay or agree to btained and read the notice | I may proceed, if eligined available under each pay someone who is required by 11 U.S.C | ble, under Chapter 7, 11,12, ch chapter, and I choose to not an attorney to help me c. § 342(b). |
| | I request relief in accordance of understand making a false st connection with a bankruptcy or both. 18 U.S.C. §§ 152, 134 Isl Gwendolyn Daniels Signature of Debtor 1 | atement, concealing proper case can result in fines up t | ty, or obtaining mone | y or property by fraud in |
| rentre direkt plant i disabilikan kalangan kalangan kalangan kalangan kalangan kalangan kalangan kalangan kala | Executed on 1/15/2016 MM / DE | | Executed on | MM/DD/YYYY |

Case 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 10:49:57 Desc Main Fill in this information to identify your case: Debtor 1 Gwendolyn Daniels First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Illinois Case number (if known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Pan A Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? ✓ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. \$ignature of Debtor 1 Signature of Debtor 2 Date 1/15/2016 MM/DD/YYYY MM/DD/YYYY

| Debtor 1 | Gwendol Case 16-01644 Doc 1 File | ed 01/20/16 Entered 01/20/16 10:49:57 Desc Main ocuments Page 68 of 70 |
|----------|---|--|
| | First Name Middle Name Di | Ocur ne nte Page 08 01 70 |
| | hìn 2 years before you filed for bankruptcy, did you ç ditors, or other parties. | give a financial statement to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the details below. | |
| | | Date issued |
| | Name | MM/DD/YYYY |
| | Number Street | |
| | City State Zip Code | |
| Part 12: | Sign Below | |
| | | ffairs and any attachments, and I declare under penalty of perjury that the answers are true concealing property, or obtaining money or property by fraud in connection with a |
| | ruptcy case can result in fines up to \$250,000, or imp | risonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | * (July Mully Males) | mull x |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 1/15/2016 | Date 1/15/2016 |
| Did | you attach additional pages to Your Statement of Fin | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| 図 | No | |
| | Yes | |
| Did | ou pay or agree to pay someone who is not an attorn | ney to help you fill out bankruptcy forms? |
| 図 | No | |
| | Yes, Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 10:49:57 Desc Main UNITED STATES BARKS FOOT TOURT Northern District of Illinois

| In re: | Daniels, Gwendolyn ; | Case No. |
|--------|--|--|
| | Debtor(s) | |
| | | Chapter. Chapter13 |
| | VERIFICA | TION OF CREDITOR MATRIX |
| | The above named Debtors hereby verify that | the attached list of creditors is true and correct to the best of their knowledge. |
| Date: | 1/15/2016 | 15/ Daniels, Gwendolyn Levrels |
| | | Фа́ліels, Gwendolyn Signature of Debtor |
| | | |
| | | <i>isi</i> |
| | | Signature of Joint Debtor |

| Deb | tor 1 | Gwend Grase 16-01644 Doc 1 Filed 01/20/16 Entered 01/20/16 10:49:57 Desc Mair First Name Documentine Page 70 of 70 | 1 | | |
|-------|---|---|-------------|--|--|
| 16. | Calc | culate the median family income that applies to you. Follow these steps: | | | |
| | | Fill in the state in which you live. Illinois | | | |
| | | Fill in the number of people in your household. | | | |
| | | Fill in the median family income for your state and size of household | \$63,820.00 | | |
| | | To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | VO. 22.0.00 | | |
| 17. | | v do the lines compare? | | | |
| | 17a. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | |
| | 17b. | 17b. q Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | |
| Part | 3; (| Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) | | | |
| 18. | | y your total average monthly income from line 11. | \$1,956.39 | | |
| 19. | Dedi | uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | | | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | -\$0.00 | | |
| | 19b. | Subtract line 19a from line 18. | \$1,956.39 | | |
| 20, | Calc | ulate your current monthly income for the year. Follow these steps: | | | |
| | 20a. | Copy line 19b. | \$1,956.39 | | |
| | | Multiply by 12 (the number of months in a year). | x 12 | | |
| | 20b. | The result is your current monthly income for the year for this part of the form. | \$23,476.68 | | |
| | 20c. | Copy the median family income for your state and size of household from line 16c. | \$63,820.00 | | |
| 21. | Andrews 4 | do the lines compare? | | | |
| | √ [| ine 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | |
| | | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. | | | |
| art i |) s | ign Below | | | |
| | ſ | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. **Signature of Debtor 1 **Date 1/15/2016 MM/DD/YYYY **Date MM/DD/YYYY | | | |
| | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | |